
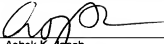


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Parkhe et al.	Art Unit: 1716
Application No: 10/786,876	Examiner: Moore, Karla A.
Confirmation No: 1903	Attorney Docket No: 008850 USA/MDP/COPPER/SC
Filed: February 24, 2004	August 4, 2010
Title: COATING FOR REDUCING CONTAMINATION OF SUBSTRATES DURING PROCESSING	San Francisco, CA 94107

Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450	Extension of Time <input type="checkbox"/> Applicant requests an extension of time under 37 C.F.R. 1.136		
Via EFS <input checked="" type="checkbox"/> Amendment Under 37 C.F.R. § 1.312 <input checked="" type="checkbox"/> Comments on Statement of Reasons for Allowance <input type="checkbox"/> PTO-SB/08 Form(s) <input type="checkbox"/> Citations <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> (2) Postcards for Return	Extension (Months)	Extension Fee	
		Large Entity	Small Entity
	<input type="checkbox"/> One Month	\$130.00	\$65.00
	<input type="checkbox"/> Two Months	\$490.00	\$245.00
	<input type="checkbox"/> Three Months	\$1,110.00	\$555.00
	Total \$ 0.00		
	<input checked="" type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made in case applicant has inadvertently overlooked the need for a petition for extension of time.		

Fees for Extra Claims						
	Claims remaining after amendment	Highest number previously paid for	Number Extra	Rate		Additional Fee
				Large Entity	Small Entity	
Total Claims	20	57	0	\$52.00	\$26.00	\$0.00
Independent Claims	3	12	0	\$220.00	\$110.00	\$0.00
Multiple Dependent Claims			0	\$390.00	\$195.00	\$0.00
Supplemental Information Disclosure Statement						
Total						\$0.00

Fee Payment <table border="1"> <tr> <td>Extension Fee</td> <td align="center">\$0.00</td> </tr> <tr> <td>Fee for Extra Claim(s)</td> <td align="center">\$0.00</td> </tr> <tr> <td>Total</td> <td align="center">\$0.00</td> </tr> </table>		Extension Fee	\$0.00	Fee for Extra Claim(s)	\$0.00	Total	\$0.00	Fee Deficiency <input checked="" type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. 10-0258. and/or <input checked="" type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. 10-0258.	
Extension Fee	\$0.00								
Fee for Extra Claim(s)	\$0.00								
Total	\$0.00								
<input type="checkbox"/> Attached is check no. _____ in the sum of \$0.00. <input type="checkbox"/> Please charge Deposit Account No. 10-0258 in the sum of \$0.00. CERTIFICATE OF TRANSMISSION (37 C.F.R. § 1.8a): I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, via facsimile transmission to (571) 273-8300, or electronically submitted via EFS on the date shown below: By:  Date: August 4, 2010 Melanie Hitchcock		Please direct telephone calls to: Ashok K. Janah at (415) 538-1555 Please continue to send correspondence to: Janah & Associates, P.C. 650 Delancey Street, Suite 106 San Francisco, CA 94107 Respectfully Submitted, By:  Date: August 4, 2010 Ashok K. Janah Registration No. 37,487							